

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 555233	RECEIPT DATE:	05 / 25 / 00
IA NUMBER:	PCT/ JP99 / 05290	IA FILING DATE:	09 / 28 / 99
FAMILY NAME:	KOJIMA	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	AKITOSHI	DEMAND RECEIVED (Y/N):	N
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	09 / 28 / 98
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	P-9904 S	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 9147234300
			FAX
NAME:	MYRON GREENSPAN		
	LACKENSPAN SIEGEL		
STREET:	ONE CHASE ROAD		
CITY:	SCARSDALE		
STATE/COUNTRY:	NY	ZIP:	10583
EMAIL:			
APPLICATION TITLES:			
	NETWORK SYSTEM		

TAB TO LAST POSITION.PUSH SEND